	PAIGN CONTRIBUTIONS AND E		,	State	of Nevada
	IZENS FOR PRIVATE ENTER	applicable)	ISUPAL	, Dis	strict (if applicable)
ame (pri:	"Box 3499 Reno NV	895°	37	75/337-3	3046
ailing Ad	ddress (include city and zip code) (K. C. Ceno - Sparkschamb			Telephone No.	
-Mail Ad	ldress	,			
elect Ap	ppropriate Box(es) [CANDIDATE PAC BAG	POL PRT	Y IND EXP	AMENDED [] AN	NUAL FILING
	Annual Filing - Due January 15, 20	04			<u> </u>
< 7	Period: January 1, 2003 - December 31, 2003				
					فسنسا
 .cumber	Report #1 Due August 31, 2004 nts in an Office with a 4-year term Period: Jan. 5,	2001 — Aug 26, 3	2004		
cumber Il others	nts in an Office with a 6-year term Period: Dec. 20), 1998 — Aug 26 2004 – Aug. 26, 2	, 2004		
allot Ad		, 2002 – Aug 26, 2	2004		5
	Report #2 Due — October 26, 2004	7, 2004 — Oct. 21	2004	FOR OF	FICE USE ONLY
		r, 2004 — Oct. 21	, 2004	<u>_ , </u>	3
]	• • • • • • • • • • • • • • • • • • • •	2, 2004 — Dec. 31			
AGs or	nly: Period: Oct. 22	2, 2004 - Dec. 5,	2004		, t
	Annual Filing - Due January 15, 2005	0.4			
Third	Period: January 1, 2004 – December 31, 20 Report suffices for 2005 Annual Filing if car	ਹਜ਼ ndidate also fi	iled Report Nos.	1 and 2	
	•		•		Cumulative
	CONTRIBUTIONS SUMMARY				From Beginning of Report Period
			,	This Period	#1 through End of This
					Reporting Period
1	Total Monetary Contributions Received in Excess	of \$100		17955	00
	2. Total Monetary Contributions Received of \$100 or			0	00
2	Z. TOTAL MICHERALY CONTINUATIONS MECCIVED OF \$100 OF		Cumulative From		
		This Period	Beginning of Report Period #1		
			Through End of This Reporting		
			Period	_	}
3	3. Total Amount of Monetary Contributions Received			1-0	00
,	(Add Lines 1 and 2)		1	1 / 75 5	
4	Excess of \$100			_	
	•				
	EX	PENSES SU	JMMARY		
,	5. Total Monetary Expenses Paid in Excess of \$100			20734	00
	6. Total Monetary Expenses Paid of \$100 or Less	-		54	62
7	7. Total Amount of All Monetary Expenses Paid			20788	62
1	(Add Lines 5 and 6) 8. Total Value of In Kind Expenses in Excess			·	
	of \$100			_	
		-			
		AFFIRMA'	TION		
l Decla	are Under Penalty of Perjury That the Foregoin	g is True and (Correct.		
				.)	_] .
	- L			1/15	104
Signatu	ıre			Date	
EL201.c	doc Revised: J	an-04	P	AGEOF	11

Name (print)

ZENS	FOR PRIVATE	ENTERPRIZE	/ ISUPAC	
	Office (if a)		District (if a	applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
Jest Codega Planning Design 433 W. Plumb Ln. Reno NV 89509	1/7/03	\$100.00	
McMullen Stategic Group Po Box 3456 Reno NV 89505	1/24/03	# 105.00	
Ray Heating Products Oba RHP Mechanical Systems Po Box 2957 Peno NV 89505	3/13/03	\$750.00	
SOMERSETT DEVELOPMENT CO. 100 W. LIBERTY ST., STE 990 Deno NV 89501	313/03	\$1,000.∞	
BRUNGONBUILT CONSTRUCTION 227 Vine St. Peno NV 89503	3111/03	\$500,00	
MODEL DAIRY 500 GOULD ST Reno NV 89502	3/05/03	#1,000.00	
DP Advisors, LLC PO Box 7098 Peno NV 89510	3/12/03	\$ 500.00	
western Nevada Supply Co. 950 S. Rock Blvd. Sparks NV 89431	3/13/03	\$1,000.00	
Harrahs Operating Co., Inc. 1023 Cherry Rd Memphis, TN 38117	3/12/03	#2,000.00	
American Ready Mix 1725 E. Commercial ROW Reno, NV 89512	3/14/03	\$500.00	
Circus Circus 500 N. Sierra St. Deno NV 89503	3/10/03	\$2,000,00	
Follow Legacy Po Box 3920 Reno NV 89505	3/11/03	\$2,000,00	
ELDORADO PO BOX 3399 Reno NV 89505	3110/03	\$2,000.00	
AGC/PAC PO BOX 10291 Reno NV 89510	3/3/03	\$ 500,00	
BARLES Coleman Construction 4741 Caughlin Pkwy., Ste. 4 Reno, NV 89509	3/13/03	\$1,000.00	
Paggio Senate Campaign Account PO Box 281 Reno NV 89504	3/11/03	#500.00	

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PAGE 1 OF 7

CITIZENS	FOR	PRIVATE	ENTERPRISE	ISUPAC
Name (print)			Office (if applicable)	

District (if applicable)

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE IF LOAN
CLEAR CHANNEL OUTBOOR 4945 Joule St. Peno NV 89502	12/9/03	\$500.00	
Peno-Sparks Chamber of Commerce POBOX 3499 Reno NV 89505	1/8/03	\$2000.00	
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PAGE 3 OF 7

Report Period # A

LT12EN3 FOR PRIVATE ENTERPRISE | SUPAC
e (print)

Office (if applicable) Name (print)

Expense Categories

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses related to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	
Other miscellaneous expenses	J
Expenses related to NRS 294A.160 (Disposition of Unspent Contributions)	K

^{**} NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

Report Period #	A
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CITIZENS FOR PRIVATE ENTERPRISE / SUPAC Varme (print)

Office (if applicable)

Displacement District (if applicable) Name (print)

Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 5 of Expenses Summary

CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
F	1/15/03 5/27/03 12/9/03	#4000,00 #15,250.00 #500,00
E	3/3/03	\$192.00 \$192.00
A	4/2/03	#100.00
H	9/29/03	\$500.00
		•
	(See Previous Page) NRS 294A.365	(See Previous Page) NRS 294A.365 1 15 03 5 27 03 12 9 03

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Name (print)			Office (if applicable)	

District (if applicable)

IN KIND

Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Value of All In-Kind Campaign Contributions to Line 4 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH IN KIND CONTRIBUTION	DESCRIPTION OF EACH IN KIND CONTRIBUTION	VALUE OR COST OF EACH IN KIND CONTRIBUTION	CHECK HERE IF LOAN
		-		
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			,	

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PAGE 6 OF 7

District (if applicable)

CITIZENS FOR PRIVATE ENTERPRISE

Office (if applicable)

1 SUPA-L

Name (print)

IN KIND

Expenses in Excess of \$100 Transfer Total Value of All In-Kind Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE IN KIND GOOD(S) OR SERVICE(S)	DESCRIPTION OF EACH IN KIND EXPENSE	DATE OF EACH IN KIND EXPENSE	VALUE OR COST OF EACH IN KIND EXPENSE
		,	
		,	

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Prescribed by Secretary of State NRS 294A.120, 294A.125, 294A.140, 294A.150, 294A.160 294A,200, 294A,210, 294A,220, 294A,362

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Revised: Jan-04